| Fill          | in this info               | ormation to identify your case:  |                                    |             |                               |
|---------------|----------------------------|--|------------------------------------|-------------|-------------------------------|
| Deb           | tor 1                      | Lisa Karin Persson   |                                    |             |                               |
| Dah           | 40                         | First Name Middle Name Last Name   |                                    |             |                               |
| 1 -           | otor 2<br>use if, filing)  | First Name Middle Name Last Name   |                                    |             |                               |
| Unit          | ed States E                | Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON   |                                    |             |                               |
| Con           | a numbar                   | 46 40257   |                                    |             |                               |
| (if kn        |                            | 16-10257   |                                    |             | k if this is an<br>ded filing |
|               |                            |  |                                    |             | · ·                           |
| Off           | ficial F                   | orm 106Sum   |                                    |             |                               |
|               |                            | of Your Assets and Liabilities and Certain State   | istical Information                |             | 12/15                         |
| infor<br>your | mation. Fil<br>original fo | e and accurate as possible. If two married people are filing together, but all of your schedules first; then complete the information on this pressure, you must fill out a new Summary and check the box at the top of the school | s form. If you are filing amend    |             |                               |
| Part          | Sum                        | marize Your Assets   |                                    |             |                               |
|               |                            |  |                                    | Your a      | ssets<br>of what you own      |
| 1.            | Schodulo                   | A/B: Property (Official Form 106A/B)   |                                    |             | •                             |
| ١.            | 1a. Copy I                 | line 55, Total real estate, from Schedule A/B  |                                    | . \$        | 795,000.00                    |
|               | 1b. Copy I                 | line 62, Total personal property, from Schedule A/B  |                                    | \$          | 17,812.00                     |
|               | 1c. Copy I                 | line 63, Total of all property on Schedule A/B   |                                    | \$          | 812,812.00                    |
| Part          | 2: Sum                     | marize Your Liabilities  |                                    |             |                               |
|               |                            |  |                                    |             | abilities                     |
|               |                            |  |                                    | Amour       | nt you owe                    |
| 2.            |                            | D: Creditors Who Have Claims Secured by Property (Official Form 106D) the total you listed in Column A, Amount of claim, at the bottom of the last   | page of Part 1 of Schedule D       | \$          | 898,906.00                    |
| 3.            |                            | E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) the total claims from Part 1 (priority unsecured claims) from line 6e of Sch   | edule E/F                          | \$          | 0.00                          |
|               | 3b. Сору                   | the total claims from Part 2 (nonpriority unsecured claims) from line 6j of S  | Schedule E/F                       | \$          | 40,372.34                     |
|               |                            |  | Your total liabilities             | \$          | 939,278.34                    |
|               |                            |  |                                    |             |                               |
| Part          | 3: Sum                     | marize Your Income and Expenses  |                                    |             |                               |
| 4.            |                            | I: Your Income (Official Form 106I) r combined monthly income from line 12 of Schedule I   |                                    | \$          | 6,370.00                      |
| 5.            |                            | J: Your Expenses (Official Form 106J) r monthly expenses from line 22c of Schedule J   |                                    | \$          | 1,834.00                      |
| Part          | 4: Ansv                    | wer These Questions for Administrative and Statistical Records   |                                    |             |                               |
| 6.            | Are vou fi                 | iling for bankruptcy under Chapters 7, 11, or 13?  |                                    |             |                               |
| ٥.            | -                          | You have nothing to report on this part of the form. Check this box and sub  | mit this form to the court with yo | our other s | chedules.                     |
| 7.            | Yes                        | d of debt do you have?   |                                    |             |                               |

the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,833.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|   | Total claim |      |
|---|-------------|------|
| From Part 4 on Schedule E/F, copy the following:  |             |      |
| 9a. Domestic support obligations (Copy line 6a.)  | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)   | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)   | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)  | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as<br>priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)  | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.  | \$          | 0.00 |

| Fill in this infor                                  | mation to identify                                       | your case and th       | iis iiiiig.   |   |  |  |   |
|---|--|------------------------|---|---|--|--|---|
| Debtor 1  | Lisa Karin Pe  |                        | News  | LastMana  |  |  |   |
| Debtor 2  | First Name   | Middle                 | e Name  | Last Name   |  |  |   |
| (Spouse, if filing)                                 | First Name   | Middle                 | e Name  | Last Name   |  |  |   |
| United States Ba                                    | ankruptcy Court for t                                    | the: WESTERN           | I DISTRICT OF   | WASHINGTON  |  |  |   |
| Case number   | 16-10257   |                        |   |   |  |  | ☐ Check if this is a  |
| -   | 10 10201   |                        |   |   |  |  | amended filing  |
| ~   | /5   |                        |   |   |  |  |   |
| _   | orm 106A/B   |                        |   |   |  |  |   |
| Schedul   | le A/B: Pro  | operty                 |   |   |  |  | 12/15   |
|   |  |                        |   | ou Own or Have an Interest In   | ·  | •  |   |
| _   |  |                        | .,  | ag, .aa, e. ea. p. epey .   |  |  |   |
| ☐ No. Go to Pa                                      |  |                        |   |   |  |  |   |
| ■ Yes. Where  | is the property?   |                        |   |   |  |  |   |
|   |  |                        |   |   |  |  |   |
| 2666 37th Street address  Seattle City  King County | A Ave SW<br>, if available, or other desc<br>WA<br>State | 98126-2107  ZIP Code   | Single- Duplex Condor  Manufa Land Investm Timesh Other Who has an ir Debtor Debtor At least  | nterest in the property? Check of 1 only 2 only 1 and Debtor 2 only cone of the debtors and another   | Current entire pr  Support Sup | of any secured class Who Have Claims value of the roperty? 795,000.00 e the nature of your fee simple, tenatate), if known. mple eck if this is comministructions)   | ims or exemptions. Put the ims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$795,000.00  our ownership interest incy by the entireties, or |
| Seattle City  King County                           | wA State   | 98126-2107<br>ZIP Code | Single- Duplex Condor  Manufa Land Investm Other Who has an ir Debtor Debtor Debtor At least Other informa property ident King coun extensive | family home or multi-unit building minium or cooperative ctured or mobile home ment property are atterest in the property? Check or 1 only 2 only 1 and Debtor 2 only | Current entire prosper a life est Fee sil  | of any secured class Who Have Claims  value of the roperty?  795,000.00  e the nature of your security of known.  mple  eck if this is committed instructions of the committed instructions ocal  e the house is | ims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$795,000.00  our ownership interest ancy by the entireties, or munity property            |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Debtor 1 Lisa k                                       | Karin Persson   |  | Case number (if known)              | 16-10257  |
|---|---|--|-------------------------------------|---|
| 3. Cars, vans, truc                                   | ks, tractors, sport utility                                       | vehicles, motorcycles  | -                                   |   |
| □ No  |   |  |                                     |   |
| ■ Yes   |   |  |                                     |   |
| 3.1 Make: <b>Do</b>                                   | odge  | Who has an interest in the property? Check one   |                                     | ed claims or exemptions. Put  |
|   | ıkota   | Debtor 1 only  |                                     | ecured claims on Schedule D:<br>Claims Secured by Property.                       |
| Year: 20  | 04  | Debtor 2 only  | Current value of th                 | e Current value of the  |
| Approximate m   |   | _ Debtor 1 and Debtor 2 only   | entire property?                    | portion you own?  |
| Other informat  | 2666 37th Ave SW.   | At least one of the debtors and another  |                                     |   |
| Seattle WA  |   | ■ Check if this is community property (see instructions)   | <b>\$6,500</b> .                    | \$6,500.00  |
| ■ No □ Yes  5 Add the dollar v .pages you have        | value of the portion you<br>e attached for Part 2. Wr             | own for all of your entries from Part 2, including ite that number here  | g any entries for                   | \$6,500.00  |
| Part 3: Describe Yo                                   | ur Personal and Household   | I Harris   |                                     |   |
| Do you own or have                                    | ve any legal or equitable   | e interest in any of the following items?  |                                     | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. Household good Examples: Major □ No ■ Yes. Describ | r appliances, furniture, line                                     | ens, china, kitchenware  |                                     |   |
|   | Living room furniture for holiday ornal kitchen appli             | furniture, television, four computers, bedro<br>debtors, dining room set, family room furni<br>ments, knick knacks, personal effects, kitcl<br>ances, washer/dryer, generic wall art, patic<br>us tools and appliances. Location: 2666 37t | iture,<br>hen ware,<br>o furniture, | \$2,000.00  |
|   | ding cell phones, cameras   | video, stereo, and digital equipment; computers, pri<br>s, media players, games  | inters, scanners; music co          | ollections; electronic devices  |
| 8. Collectibles of v<br>Examples: Antiq               | ralue<br>ues and figurines; painting<br>collections, memorabilia, | gs, prints, or other artwork; books, pictures, or other, collectibles  | r art objects; stamp, coin,         | or baseball card collections;   |
|   | s, photographic, exercise cal instruments                         | , and other hobby equipment; bicycles, pool tables,  | golf clubs, skis; canoes a          | and kayaks; carpentry tools;  |

| Debto          | or 1              | Lisa Karin Persson                                       |                          | Case number (if know   | n) 16-10257                                       |
|----------------|-------------------|--|--------------------------|--|---|
| 10. <b>F</b> i |                   |  |                          |  |   |
| _              | <i>xamp</i><br>No | les: Pistols, rifles, shotgu                             | ns, ammunition, and rel  | ated equipment   |   |
|                |                   | Describe   |                          |  |   |
| 11. <b>C</b>   | lothes            | <b>3</b>   |                          |  |   |
|                | <i>xamp</i><br>No | les: Everyday clothes, fur                               | s, leather coats, design | er wear, shoes, accessories                                  |   |
|                |                   | Describe   |                          |  |   |
|                |                   |  |                          |  | <b>A</b>  |
|                |                   | Clothe   | es and shoes for del     | otor, husband and two children                               | \$500.00  |
| 12. <b>J</b> e | ewelry            | ,  |                          |  |   |
| _E             | хатр              |  | stume jewelry, engagen   | ent rings, wedding rings, heirloom jewelry, watches, gem     | s, gold, silver                                   |
|                | No<br>Voc         | Describe   |                          |  |   |
|                |                   |  |                          |  |   |
| -              |                   | r <b>m animals</b><br><i>les:</i> Dogs, cats, birds, hor | rses                     |  |   |
|                | No                |  |                          |  |   |
|                | Yes.              | Describe   |                          |  |   |
|                | -                 | er personal and housel                                   | nold items you did not   | already list, including any health aids you did not list     |   |
|                | No<br>Yes         | Give specific information.                               |                          |  |   |
| _              |                   | Civo opcomo imornidacina                                 |                          |  |   |
| 15.            | Add th            | ne dollar value of all of y                              | our entries from Part    | 3, including any entries for pages you have attached         | ¢2 500 00   |
| 1              | for Pa            | rt 3. Write that number                                  | here                     |  | \$2,500.00  |
|                |                   |  |                          |  |   |
|                |                   | cribe Your Financial Assets<br>n or have any legal or e  |                          | y of the following?  | Current value of the                              |
| ,              |                   | , ,  | •                        | , g  | <pre>portion you own? Do not deduct secured</pre> |
|                |                   |  |                          |  | claims or exemptions.                             |
| 16. <b>C</b>   | ash               |  |                          |  |   |
| _              | -                 | les: Money you have in yo                                | our wallet, in your home | , in a safe deposit box, and on hand when you file your pe   | etition   |
| _              | No<br>Yes         |  |                          |  |   |
| 17 D           | annsi             | ts of money  |                          |  |   |
|                |                   | les: Checking, savings, or                               |                          | s; certificates of deposit; shares in credit unions, brokera | ge houses, and other similar                      |
|                | No                | institutions. If you na                                  | ve multiple accounts wi  | h the same institution, list each.                           |   |
|                | Yes               |  |                          | Institution name:  |   |
|                |                   |  |                          |  | ***   |
|                |                   | 17.1.  | Checking                 | US Bank bank account ending in 8397                          | \$6,063.00  |
|                |                   |  |                          |  |   |
|                |                   | 17.2.  | Checking                 | BECU bank account ending in 3772 and 3946                    | \$202.00  |
|                |                   |  |                          |  |   |
|                |                   | 17.3.  | Checking                 | Daughter Eva's BECU bank account ending in 2740 and 8586     | \$303.00  |
|                |                   | 17.0.  | <del></del>              |  |   |
|                |                   |  |                          | Son Krister's BECU bank account ending in                    | <b></b>   |
|                |                   | 17.4.  | Checking                 | 2047   | \$172.00  |

Official Form 106A/B

Schedule A/B: Property

page 3

| De  | ebtor 1                        | Lisa Kari                        | n Persson   | Case number (if known) 16   | -10257   |
|-----|--------------------------------|----------------------------------|---|---|--|
| 18. |                                |                                  | ds, or publicly traded stoc<br>nds, investment accounts wi                              | ks th brokerage firms, money market accounts  |  |
|     | ■ No<br>□ Yes.                 |                                  | Institution or is:  | suer name:  |  |
|     |                                |                                  | d stock and interests in in   | corporated and unincorporated businesses, including an interest in  | an LLC, partnership.   |
|     | and jo ■ No                    | oint venture                     |   |   | <b>, p</b> ,   |
|     |                                | Give specific                    | c information about them<br>Name of entity:   | % of ownership:   |  |
|     | Negot                          | tiable instrume                  | ents include personal checks  | negotiable and non-negotiable instruments<br>s, cashiers' checks, promissory notes, and money orders.<br>ot transfer to someone by signing or delivering them.              |  |
|     | ☐ Yes.                         | Give specific                    | information about them Issuer name:   |   |  |
|     | Exam <sub>l</sub><br>□ No<br>□ | ples: Interests                  |   | (k), 403(b), thrift savings accounts, or other pension or profit-sharing plan   | as   |
|     | ■ Yes.                         | List each acc                    | count separately.  Type of account:   | Institution name:   |  |
|     |                                |                                  | 401(k)  | Wife's 401K account   | \$1,000.00   |
| 23. | ■ No □ Yes.  Annuit ■ No       |                                  |   | rent, public utilities (electric, gas, water), telecommunications companies,  Institution name or individual:  money to you, either for life or for a number of years)  on. | or others  |
|     | 26 U.S.                        | ets in an educ<br>.C. §§ 530(b)( | cation IRA, in an account in 1), 529A(b), and 529(b)(1).                                | n a qualified ABLE program, or under a qualified state tuition progra   | m.   |
|     | ■ No<br>□ Yes.                 |                                  | Institution name and descr  | ription. Separately file the records of any interests.11 U.S.C. § 521(c):   |  |
|     | ■ No                           | •                                | r future interests in proper  | rty (other than anything listed in line 1), and rights or powers exercis  | able for your benefit  |
|     | Exam <sub>i</sub><br>■ No      | ples: Internet                   |   | es, and other intellectual property roceeds from royalties and licensing agreements   |  |
|     | Exam <sub>l</sub> ■ No         | ples: Building                   | es, and other general intar<br>permits, exclusive licenses,<br>c information about them | ngibles cooperative association holdings, liquor licenses, professional licenses  |  |
|     |                                | property ow                      |   |   | Current value of the   |
|     |                                |                                  |   |   | portion you own? Do not deduct secured claims or exemptions. |

| Debtor 1          | Lisa Karin Persson  |   | Case number (if known)     | 16-10257                 |
|-------------------|---|---|----------------------------|--------------------------|
| 28. <b>Tax re</b> | efunds owed to you  |   |                            |                          |
| ■ Yes             | s. Give specific information about  | them, including whether you already filed the returns a   | nd the tax years           |                          |
|                   |   | Prospective 2015 tax refund, amount estimated based on 2014 tax refund                          | Federal                    | \$1,072.00               |
|                   | h   |   |                            |                          |
|                   | ly support<br>nples: Past due or lump sum alim  | ony, spousal support, child support, maintenance, divo  | orce settlement, property  | settlement               |
|                   | s. Give specific information  |   |                            |                          |
| Exan              | r amounts someone owes you<br>nples: Unpaid wages, disability ins<br>benefits; unpaid loans you | surance payments, disability benefits, sick pay, vacatio<br>made to someone else                | on pay, workers' compe     | nsation, Social Security |
| ■ No<br>□ Yes     | s. Give specific information  |   |                            |                          |
|                   | ests in insurance policies<br>nples: Health, disability, or life insu                           | urance; health savings account (HSA); credit, homeow  | ner's, or renter's insurar | nce                      |
| ☐ Yes             | s. Name the insurance company of Company  |   | rv:                        | Surrender or refund      |
| some<br>No        | a are the beneficiary of a living true cone has died.  S. Give specific information             | st, expect proceeds from a life insurance policy, or are  | currently entitled to rec  | eive property because    |
|                   |   | r or not you have filed a lawsuit or made a demand<br>putes, insurance claims, or rights to sue | for payment                |                          |
| _                 | s. Describe each claim  |   |                            |                          |
| 34. <b>Other</b>  | contingent and unliquidated c   | laims of every nature, including counterclaims of t   | he debtor and rights to    | set off claims           |
|                   | s. Describe each claim  |   |                            |                          |
| ■ No              | inancial assets you did not alre  Give specific information                                     | ady list  |                            |                          |
|                   |   | ntries from Part 4, including any entries for pages   |                            | \$8,812.00               |
| Part 5: D         | escribe Any Business-Related Propo  | erty You Own or Have an Interest In. List any real estate in I                                  | Part 1.                    |                          |
| 37. <b>Do you</b> | own or have any legal or equitable i  | interest in any business-related property?  |                            |                          |
| _                 | Go to Part 6.   |   |                            |                          |
| ⊔ Yes.            | Go to line 38.  |   |                            |                          |
|                   | escribe Any Farm- and Commercial you own or have an interest in farmlan                         | Fishing-Related Property You Own or Have an Interest In.<br>d, list it in Part 1.               |                            |                          |
|                   |   | itable interest in any farm- or commercial fishing-r  | elated property?           |                          |
| ■ No              | o. Go to Part 7.  |   |                            |                          |

| Debte  | or 1 Lisa Karin Persson   |                    | Case number (if known)    | 16-10257                |
|--------|---|--------------------|---------------------------|-------------------------|
| [      | Yes. Go to line 47.   |                    |                           |                         |
| Part 7 | Describe All Property You Own or Have an Interest in That You I   | Did Not List Above |                           |                         |
|        | o you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information   | •                  |                           |                         |
| _      | res. Give specific information  |                    |                           |                         |
|        | Separate property belonging to in Sweden worth approximately  |                    | a retirement account      | \$0.00                  |
| 54.    | Add the dollar value of all of your entries from Part 7. Write the  | at number here     |                           | \$0.00                  |
| 01.    | The art of |                    |                           | Ψ0.00                   |
| Part 8 | List the Totals of Each Part of this Form   |                    |                           |                         |
| 55.    | Part 1: Total real estate, line 2   |                    |                           | \$795,000.00            |
| 56.    | Part 2: Total vehicles, line 5  | \$6,500.00         |                           | <u> </u>                |
| 57.    | Part 3: Total personal and household items, line 15   | \$2,500.00         |                           |                         |
| 58.    | Part 4: Total financial assets, line 36   | \$8,812.00         |                           |                         |
| 59.    | Part 5: Total business-related property, line 45  | \$0.00             |                           |                         |
| 60.    | Part 6: Total farm- and fishing-related property, line 52   | \$0.00             |                           |                         |
| 61.    | Part 7: Total other property not listed, line 54 +  | \$0.00             |                           |                         |
| 62.    | Total personal property. Add lines 56 through 61  | \$17,812.00        | Copy personal property to | otal <b>\$17,812.00</b> |
| 63     | Total of all property on Schedule A/R Add line 55 ± line 62   |                    |                           | \$912 912 <b>0</b> 0    |

| Fill in this information to identify your case: |                   |                  |               |  |  |
|---|-------------------|------------------|---------------|--|--|
| Debtor 1  | Lisa Karin Persso | on               |               |  |  |
|   | First Name        | Middle Name      | Last Name     |  |  |
| Debtor 2  |                   |                  |               |  |  |
| (Spouse if, filing)                             | First Name        | Middle Name      | Last Name     |  |  |
| United States Bankruptcy Court for the:         |                   | WESTERN DISTRICT | OF WASHINGTON |  |  |
| Case number                                     | 16-10257          |                  |               |  |  |
| (if known)                                      |                   |                  |               |  |  |

☐ Check if this is an amended filing

## Official Form 106C

Part 1: Identify the Property You Claim as Exempt

# Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| n nn = \$500  | 11 U.S.C. § 522(d)(3)              |  |  |  |  |  |  |
|---|------------------------------------|--|--|--|--|--|--|
| □ 100% of fair market value, u<br>any applicable statutory limit                                    | to                                 |  |  |  |  |  |  |
| <u>0.00</u> ■ \$2,000.  | 11 U.S.C. § 522(d)(3)              |  |  |  |  |  |  |
| ☐ 100% of fair market value, u any applicable statutory limit                                       | to                                 |  |  |  |  |  |  |
| 0.00 ■ \$2,825.   | 11 U.S.C. § 522(d)(5)              |  |  |  |  |  |  |
| 100% of fair market value, u any applicable statutory limit   | to                                 |  |  |  |  |  |  |
| 0.00  | 11 U.S.C. § 522(d)(2)              |  |  |  |  |  |  |
| rom Check only one box for each exemption   |                                    |  |  |  |  |  |  |
| of the Amount of the exemption you claim n  | Specific laws that allow exemption |  |  |  |  |  |  |
| For any property you list on Schedule A/B that you claim as exempt, fill in the information below.  |                                    |  |  |  |  |  |  |
| (2)   |                                    |  |  |  |  |  |  |
| ions. 11 U.S.C. § 522(b)(3)   |                                    |  |  |  |  |  |  |
| . Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. |                                    |  |  |  |  |  |  |
|   |                                    |  |  |  |  |  |  |

Official Form 106C

Schedule C: The Property You Claim as Exempt

\$500.00

100% of fair market value, up to any applicable statutory limit

\$500.00

page 1 of 2

husband and two children Line from Schedule A/B: 11.1

| otor 1 Lisa Karin Persson   |   |  | Case number (if known)  | 16-10257                           |
|---|---|--|---|------------------------------------|
| Brief description of the property and line<br>Schedule A/B that lists this property | on Current value of the portion you own | The state of the s |   | Specific laws that allow exemption |
|   |   |  |   |                                    |
| Checking: US Bank bank accoเ<br>ending in 8397                                      | septiment \$6,063.00                    |  | \$6,063.00  | 11 U.S.C. § 522(d)(5)              |
| ine from Schedule A/B: 17.1   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking: BECU bank accounted   | \$202.00                                |  | \$202.00  | 11 U.S.C. § 522(d)(5)              |
| ine from Schedule A/B: 17.2   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| hecking: Daughter Eva's BEC ank account ending in 2740 a                            |   |  | \$303.00  | 11 U.S.C. § 522(d)(5)              |
| 586 ine from <i>Schedule A/B</i> : 17.3   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| Checking: Son Krister's BECU  | bank \$172.00                           |  | \$172.00  | 11 U.S.C. § 522(d)(5)              |
| ine from Schedule A/B: 17.4   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| 01(k): Wife's 401K account ine from Schedule A/B: 21.1                              | \$1,000.00                              |  | \$1,000.00  | 11 U.S.C. § 522(d)(12)             |
| ine nom <i>Schedule A.B.</i> 2111   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| ederal: Prospective 2015 tax r  |   |  | \$1,072.00  | 11 U.S.C. § 522(d)(5)              |
| efund<br>ine from Schedule A/B: <b>28.1</b>   |   |  | 100% of fair market value, up to any applicable statutory limit |                                    |
| are you claiming a homestead exer<br>Subject to adjustment on 4/01/16 and           |   |  | iled on or after the date of adiustme                           | nt.)                               |
| ■ No  |   |  | and or asjudino   | • /                                |
| Yes. Did you acquire the propert  | y covered by the exemption w            | ithin 1  | ,215 days before you filed this case                            | ?                                  |
| □ No  | . , ,                                   |  | •   |                                    |
| ☐ Yes   |   |  |   |                                    |

| Fill in this information to identify your case: |                   |                  |               |  |  |
|---|-------------------|------------------|---------------|--|--|
| Debtor 1  | Lisa Karin Persso | on               |               |  |  |
|   | First Name        | Middle Name      | Last Name     |  |  |
| Debtor 2  |                   |                  |               |  |  |
| (Spouse if, filing)                             | First Name        | Middle Name      | Last Name     |  |  |
| United States Bankruptcy Court for the:         |                   | WESTERN DISTRICT | OF WASHINGTON |  |  |
| Case number                                     | 16-10257          |                  |               |  |  |
|   |                   |                  |               |  |  |

☐ Check if this is an amended filing

### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | r company with<br>Name, Number | whom you have the                       | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------------------------|---|---------------------|---|
| 2.1 |           |                                |   |                     |   |
|     | Name      |                                |   |                     | <del>_</del>                            |
|     |           |                                |   |                     |   |
|     | Number    | Street                         |   |                     |   |
|     | City      |                                | State                                   | ZIP Code            | _                                       |
| 2.2 |           |                                |   |                     |   |
|     | Name      |                                |   |                     |   |
|     | - L       |                                |   |                     | <u> </u>                                |
|     | Number    | Street                         |   |                     |   |
|     | City      |                                | State                                   | ZIP Code            | _                                       |
| 2.3 |           |                                |   |                     | _                                       |
|     | Name      |                                |   |                     |   |
|     |           |                                |   |                     |   |
|     | Number    | Street                         |   |                     |   |
|     | City      |                                | State                                   | ZIP Code            | <u> </u>                                |
| 2.4 |           |                                |   |                     |   |
|     | Name      |                                |   |                     |   |
|     |           |                                |   |                     |   |
|     | Number    | Street                         |   |                     | <del></del>                             |
|     | City      |                                | State                                   | ZIP Code            |   |
| 2.5 | J.,,      |                                | • |                     |   |
|     | Name      |                                |   |                     | <del>_</del>                            |
|     |           |                                |   |                     |   |
|     | Number    | Street                         |   |                     | _                                       |
|     | City      |                                | State                                   | ZIP Code            | _                                       |
|     |           |                                |   |                     |   |

| Fill in th     | is information                | n to identify you                       | r case:  |                        |                                       |  |
|----------------|-------------------------------|---|--|------------------------|---------------------------------------|--|
| Debtor 1       |                               | sa Karin Perss                          |  |                        |                                       |  |
| Debtor 2       |                               | t Name                                  | Middle Name  | Last Name              |                                       |  |
| (Spouse if,    |                               | t Name                                  | Middle Name  | Last Name              |                                       |  |
| United S       | tates Bankrup                 | tcy Court for the:                      | WESTERN DISTRICT OF  | WASHINGTON             |                                       |  |
| Case nu        | mber <b>16-10</b>             | 257                                     |  |                        |                                       |  |
| (if known)     |                               |   |  |                        |                                       | Check if this is an amended filing   |
| Offici         | al Form                       | 106H                                    |  |                        |                                       |  |
| _              |                               | Your Cod                                | lehtors  |                        |                                       | 12/15  |
| people a       | re filing toget<br>and number | her, both are eq<br>the entries in th   | ually responsible for supply                               | ing correct informat   | tion. If more space is                | rate as possible. If two married<br>needed, copy the Additional Page<br>op of any Additional Pages, write    |
| 1. D           | o you have an                 | y codebtors? (I                         | f you are filing a joint case, do                          | not list either spouse | as a codebtor.                        |  |
| ■ N            |                               |   |  |                        |                                       |  |
| ΠY             | es                            |   |  |                        |                                       |  |
|                |                               |   | ou lived in a community pro<br>a, Nevada, New Mexico, Puer |                        |                                       | rty states and territories include<br>.)   |
| ПΝ             | o. Go to line 3               |   |  |                        |                                       |  |
|                |                               |   | ouse, or legal equivalent live v                           | with you at the time?  |                                       |  |
|                | _                             |   |  | ·                      |                                       |  |
|                | □ No<br>■ Yes.                |   |  |                        |                                       |  |
|                | <b>—</b> 103.                 |   |  |                        |                                       |  |
|                | In whic                       | ch community sta                        | te or territory did you live?                              | -NONE-                 | . Fill in the name a                  | and current address of that person.  |
|                | Name of                       | vour spouse, former s                   | pouse, or legal equivalent                                 |                        |                                       |  |
|                |                               | Street, City, State & Z                 |  |                        |                                       |  |
| in liı<br>Forr | ne 2 again as                 | a codebtor only                         | if that person is a guaranto                               | r or cosigner. Make    | sure you have listed                  | ng with you. List the person show<br>the creditor on Schedule D (Offici<br>), Schedule E/F, or Schedule G to |
|                |                               | our codebtor<br>Street, City, State and | ZIP Code   |                        | Column 2: The cr<br>Check all schedul | editor to whom you owe the debt es that apply:   |
| 3.1            |                               |   |  |                        | ☐ Schedule D, lir                     | ne   |
|                | Name                          |   |  |                        | ☐ Schedule E/F,                       | line   |
|                |                               |   |  |                        | ☐ Schedule G, lii                     | ne   |
|                | Number<br>City                | Street                                  | State  | ZIP Code               | _                                     |  |
| 3.2            |                               |   |  |                        | ☐ Schedule D, lir                     | 20   |
| 3.2            | Name                          |   |  |                        | Schedule E/F,                         |  |
|                |                               |   |  |                        | ☐ Schedule G, lin                     |  |
|                | Number                        | Street                                  |  |                        | _                                     |  |
|                | City                          |   | State  | ZIP Code               |                                       |  |

Official Form 106H Software Copyright (c) 1996-2016 Best Case, LLC - www.bestcase.com Schedule H: Your Codebtors

| Fill in this information        | to identify your case:                             |  |
|---------------------------------|--|--|
| Debtor 1                        | Lisa Karin Persson                                 |  |
| Debtor 2<br>(Spouse, if filing) |  |  |
| United States Bankrup           | otcy Court for the: WESTERN DISTRICT OF WASHINGTON |  |
| Case number (If known)          | -10257   | Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  |
| O(() = ( = 1   F = ====         | 4001   | and the second s |

# Official Form 106l

# Schedule I: Your Income

12/15

MM / DD/ YYYY

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Fill in your employment information.                        |                      | Debtor 1                                       | Debtor 2 or non-filing spouse |
|---|----------------------|--|-------------------------------|
| If you have more than one job,                              | Employment status    | ■ Employed                                     | ■ Employed                    |
| attach a separate page with<br>information about additional | Employment status    | ☐ Not employed                                 | ☐ Not employed                |
| employers.  | Occupation           | Paralegal                                      |                               |
| Include part-time, seasonal, or self-employed work.         | Employer's name      | Jager Law Offices, PLLC                        | Self-employed                 |
| Occupation may include student or homemaker, if it applies. | Employer's address   | 600 Stewart Street, #1100<br>Seattle, WA 98101 |                               |
|   | How long employed ti | here? 2+                                       |                               |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|    |  |    |     | For Debtor 1 |     | ebtor 2 or<br>ling spouse |
|----|--|----|-----|--------------|-----|---------------------------|
| 2. | <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | \$  | 4,333.00     | \$  | 500.00                    |
| 3. | Estimate and list monthly overtime pay.  | 3. | +\$ | 0.00         | +\$ | 0.00                      |
| 4. | Calculate gross Income. Add line 2 + line 3.   | 4. | \$  | 4,333.00     | \$_ | 500.00                    |

| Debte | or 1 <b>L</b>                                 | Lisa Karin Persson   |   | C                          | Case number (if kn                       | own)                                   | 16-1                                   | 0257   |  |                            |
|-------|---|--|---|----------------------------|--|--|--|--------|--|----------------------------|
|       | Сору  | line 4 here  | 4.  |                            | For Debtor 1 \$ 4,333                    | .00                                    |  | Debtor |  |                            |
| 5.    | l ist a                                       | II payroll deductions:   |   |                            |  |  |  |        |  | =                          |
| J.    | 5a.<br>5b.<br>5c.<br>5d.<br>5e.<br>5f.<br>5g. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:  | 5a<br>5b<br>5c<br>5d<br>5e<br>5f.<br>5g<br>5h | ).<br>:.<br> .<br>!.<br> . | \$ 0<br>\$ 0<br>\$ 0<br>\$ 0<br>\$ 0     | .00<br>.00<br>.00<br>.00<br>.00<br>.00 | \$                                     |        | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | -<br>-<br>-<br>-<br>-      |
| 6.    | Add tl  | he payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.  |                            | \$ 463                                   | .00                                    | \$_                                    |        | 0.00   | _                          |
| 7.    | Calcu   | late total monthly take-home pay. Subtract line 6 from line 4.   | 7.  |                            | \$3,870                                  | .00                                    | \$_                                    |        | 500.00                                       | _                          |
| 9.    | 8a.<br>8b.<br>8c.<br>8d.<br>8e.<br>8f.        | Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistanthat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income  Contributions from debtor's father  all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 8c<br>8d<br>8e                                | ).<br>                     | \$ 0<br>\$ 0<br>\$ 0<br>\$ 0<br>\$ 2,000 |  | \$ _<br>\$ _<br>\$ _<br>\$ _<br>+ \$ _ |        | 0.00<br>0.00<br>0.00<br>0.00<br>0.00<br>0.00 | -<br>-<br>-<br>-<br>-<br>- |
| O.    | 7.00 0  | and the state of t | г.  | Ľ                          | 2,000                                    | .00                                    |  |        | 0.0  |                            |
| 10.   |   | alate monthly income. Add line 7 + line 9. ne entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   | 10.   | \$_                        | 5,870.00                                 | + \$_                                  | :                                      | 500.00 | = \$ _                                       | 6,370.00                   |
| 11.   | Includ<br>other f                             | all other regular contributions to the expenses that you list in <i>Schedu</i> le contributions from an unmarried partner, members of your household, you friends or relatives.  It include any amounts already included in lines 2-10 or amounts that are not five:   | ur depe                                       |                            |  |  |  |        |  | 0.00                       |
| 12.   |   | he amount in the last column of line 10 to the amount in line 11. The rethat amount on the Summary of Schedules and Statistical Summary of Ceres   |   |                            |  |  |  |        | \$   | 6,370.00                   |
| 13.   |   | ou expect an increase or decrease within the year after you file this form   | m?  |                            |  |  |  |        | Combi<br>monthl                              | ned<br>ly income           |
|       |   | Yes. Explain:  |   |                            |  |  |  |        |  |                            |

|                                   | n this information to identify your case:  |                             |          |   |  |
|-----------------------------------|--|-----------------------------|----------|---|--|
| Debto                             | Lisa Karin Persson   |                             |          | ck if this is:  |  |
| Debto<br>Spoo                     | or 2 use, if filing)   |                             |          | An amended filing<br>A supplement show<br>13 expenses as of | ving postpetition chapter<br>the following date: |
| Jnite                             | ed States Bankruptcy Court for the: WESTERN DISTRICT OF WA   | ASHINGTON                   | -        | MM / DD / YYYY  |  |
|                                   | e number   |                             |          |   |  |
| Эf                                | ficial Form 106J   |                             |          |   |  |
|                                   | chedule J: Your Expenses as complete and accurate as possible. If two married people   |                             |          |   | 12/  |
| num<br>Part                       | rmation. If more space is needed, attach another sheet to the her (if known). Answer every question.  1: Describe Your Household Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?  | his form. On the top of any | / additi | onal pages, write y   | your name and case                               |
|                                   | ☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, Exper   | nses for Separate Household | of Deb   | otor 2.   |  |
| 2.                                | Do you have dependents? ☐ No   |                             |          |   |  |
|                                   | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent  | •                           | ip to    | Dependent's age   | Does dependent live with you?                    |
|                                   | Do not state the dependents names.   | Daughter                    |          | 13  | □ No<br>■ Yes                                    |
|                                   |  | Son                         |          | 16  | □ No ■ Yes □ No □ Yes □ No                       |
| 3.                                | Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes  |                             |          | -   | ☐ Yes  |
|                                   | 2: Estimate Your Ongoing Monthly Expenses mate your expenses as of your bankruptcy filing date unlesenses as of a date after the bankruptcy is filed. If this is a slicable date.  |                             |          |   |  |
| Estii<br>expe                     | iloubio dato.  |                             |          |   |  |
| Estinexpe<br>appl<br>appl<br>nclu | ude expenses paid for with non-cash government assistan value of such assistance and have included it on Schedule icial Form 106l.)  |                             |          | Your expe   | enses  |
| expe<br>appl<br>nclu<br>he v      | ude expenses paid for with non-cash government assistan value of such assistance and have included it on Schedule  | e I: Your Income            | 4. \$    |   | enses<br>0.00                                    |
| expe<br>appl<br>nclu<br>he v      | ude expenses paid for with non-cash government assistan value of such assistance and have included it on <i>Schedule</i> icial Form 106l.)  The rental or home ownership expenses for your residence.  | e I: Your Income            | 4. \$    |   |  |
| expe<br>appl<br>nclu<br>he v      | ude expenses paid for with non-cash government assistant value of such assistance and have included it on Schedule icial Form 106l.)  The rental or home ownership expenses for your residence payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes | e I: Your Income            | 4a. \$   |   |  |
| Estinexpe<br>appl<br>Inclu        | ude expenses paid for with non-cash government assistant value of such assistance and have included it on Schedule icial Form 106l.)  The rental or home ownership expenses for your residence payments and any rent for the ground or lot.  If not included in line 4:                        | e I: Your Income            |          |   | 0.00   |

Schedule J: Your Expenses Official Form 106J

page 1

| Debtor 1 Lisa Karin Pe   | ersson   | Case number (if known) | 16-10257                    |
|--|--|------------------------|-----------------------------|
| 6. Utilities:  |  |                        |                             |
| 6a. Electricity, heat  | , natural gas  | 6a. \$                 | 120.00                      |
| - · · · · · · · · · · · · · · · · · · ·                            | garbage collection   | 6b. \$                 | 100.00                      |
| 6c. Telephone, cell  | phone, Internet, satellite, and cable services   | 6c. \$                 | 150.00                      |
| 6d. Other. Specify:  |  | 6d. \$                 | 0.00                        |
| <ol><li>Food and housekeep</li></ol>                               | ping supplies  | 7. \$                  | 800.00                      |
| 8. Childcare and childr  | en's education costs   | 8. \$                  | 0.00                        |
| 9. Clothing, laundry, ar   | nd dry cleaning  | 9. \$                  | 50.00                       |
| 10. Personal care produ  |  | 10. \$                 | 54.00                       |
| 11. Medical and dental e   |  | 11. \$                 | 0.00                        |
| Do not include car pay   |  | 12. \$                 | 300.00                      |
|  | s, recreation, newspapers, magazines, and books  | 13. \$                 | 100.00                      |
| 14. Charitable contribut   | ions and religious donations   | 14. \$                 | 0.00                        |
| 15. Insurance.   |  |                        |                             |
|  | nce deducted from your pay or included in lines 4 or 20.   | 45- 6                  | 0.00                        |
| 15a. Life insurance  | _  | 15a. \$                | 0.00                        |
| 15b. Health insurance  |  | 15b. \$                | 0.00                        |
| 15c. Vehicle insuran   |  | 15c. \$<br>15d. \$     | 100.00                      |
| 15d. Other insurance   |  |                        | 0.00                        |
| Specify:   | e taxes deducted from your pay or included in lines 4 or 20.   | 16. \$                 | 0.00                        |
| 17. Installment or lease   |  | 17a. \$                | 0.00                        |
| 17a. Car payments f  |  | 17b. \$                | 0.00                        |
| <ul><li>17b. Car payments f</li><li>17c. Other. Specify:</li></ul> |  | 176. \$                | 0.00                        |
| 17d. Other. Specify:   |  | 17d. \$                | 0.00<br>0.00                |
|  | imony, maintenance, and support that you did not repo  |                        | 0.00                        |
|  | pay on line 5, Schedule I, Your Income (Official Form 1  |                        | 0.00                        |
|  | make to support others who do not live with you.   | \$                     | 0.00                        |
| Specify:   |  | 19.                    |                             |
|  | expenses not included in lines 4 or 5 of this form or on   |                        |                             |
| 20a. Mortgages on o  |  | 20a. \$                | 0.00                        |
| 20b. Real estate tax   |  | 20b. \$                | 0.00                        |
|  | owner's, or renter's insurance   | 20c. \$                | 0.00                        |
| ·  | epair, and upkeep expenses   | 20d. \$                | 0.00                        |
|  | ssociation or condominium dues   | 20e. \$                | 0.00                        |
| 21. Other: Specify:  |  | 21+\$                  | 0.00                        |
| 22. Calculate your mont  | hly expenses   |                        |                             |
| 22a. Add lines 4 throu   |  | \$                     | 1,834.00                    |
|  | onthly expenses for Debtor 2), if any, from Official Form 10   |                        | 1,00 1100                   |
| • • • • •  | 22b. The result is your monthly expenses.  | \$                     | 1,834.00                    |
| 23. Calculate your mont  | hly net income.  |                        |                             |
|  | our combined monthly income) from Schedule I.  | 23a. \$                | 6,370.00                    |
|  | thly expenses from line 22c above.   | 23b\$                  | 1,834.00                    |
|  |  |                        | ,                           |
|  | nonthly expenses from your monthly income. ur <i>monthly net income</i> .  | 23c. \$                | 4,536.00                    |
|  | crease or decrease in your expenses within the year af<br>ect to finish paying for your car loan within the year or do you expect<br>of your mortgage? |                        | se or decrease because of a |

| Fill          | n this info              | ormation to identify you                    | r case:  |   |  |   |
|---------------|--------------------------|---|--|---|--|---|
| Debt          |                          | Lisa Karin Perss                            |  |   |  |   |
|               |                          | First Name                                  | Middle Name  | Last Name   |  |   |
| Debt<br>(Spou | tor 2<br>ise if, filing) | First Name                                  | Middle Name  | Last Name   |  |   |
|               |                          | Bankruptcy Court for the:                   | WESTERN DISTRICT O   | F WASHINGTON  |  |   |
|               |                          |   |  |   |  |   |
| (if kno       | e number<br>own)         | 16-10257                                    |  |   | _  | heck if this is an mended filing                      |
|               |                          | orm 107<br>at of Financial                  | Affairs for Indivic  | luals Filing for B                                    | ankruptcy  | 12/15   |
| infor         | mation. If               |   | , attach a separate sheet to   |   | equally responsible for sup<br>y additional pages, write yo      |   |
| Part          | 1: Give                  | Details About Your Ma                       | arital Status and Where You  | Lived Before  |  |   |
| 1.            | What is yo               | our current marital statu                   | ıs?  |   |  |   |
|               | ■ Marrie                 | ed<br>arried                                |  |   |  |   |
| 2.            | During the               | e last 3 years, have you                    | lived anywhere other than  | where you live now?                                   |  |   |
|               | ■ No<br>□ Yes. L         | ist all of the places you                   | lived in the last 3 years. Do n  | ot include where you live nov                         | <i>N</i> .   |   |
|               | Debtor 1                 | Prior Address:                              | Dates Debtor 1 lived there   | Debtor 2 Prior Ad                                     | ldress:  | Dates Debtor 2<br>lived there                         |
|               |                          |   |  |   | nity property state or territor<br>lico, Texas, Washington and V |   |
|               | □ No<br>■ Yes.           | Make sure you fill out Sc.                  | hedule H: Your Codebtors (O  | fficial Form 106H).                                   |  |   |
| Part          | 2 Expl                   | lain the Sources of You                     | ır Income  |   |  |   |
|               | Fill in the to           | otal amount of income yo                    | nployment or from operatir<br>ou received from all jobs and<br>have income that you receiv | all businesses, including par                         |  | ndar years?   |
|               | □ No                     |   |  |   |  |   |
|               | Yes. F                   | Fill in the details.                        |  |   |  |   |
|               |                          |   | Debtor 1   |   | Debtor 2   |   |
|               |                          |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                       | Gross income<br>(before deductions<br>and exclusions) |
|               |                          | 1 of current year until led for bankruptcy: | ■ Wages, commissions, bonuses, tips  | \$4,333.34  | ☐ Wages, commissions, bonuses, tips                              |   |
|               |                          |   | ☐ Operating a business   |   | ☐ Operating a business   |   |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

| De   | ebtor 1 Lis                             | sa Karin P                                   | ersson  |  |   |   |   | Case nu                              | mber (if known)                     | 16-1025                       | 7   |          |
|--|---|--|---|--|---|---|---|--------------------------------------|-------------------------------------|-------------------------------|---|----------|
|  |   |  |   |  |   |   |   |                                      |                                     |                               |   |          |
|  |   |  |   | Debtor '   | 1   |   |   | D                                    | ebtor 2                             |                               |   |          |
|  |   |  |   | Sources  | s of income<br>Il that apply.   | (befo   | ss income<br>ore deductions ar<br>usions)                     | S                                    | ources of ind<br>heck all that a    |                               | Gross incor<br>(before dedu<br>and exclusio | ctions   |
|  | or last caler<br>anuary 1 to            | idar year:<br>December                       | 31, 2015 )  |  | ■ Wages, commissions, \$60,667.00 onuses, tips  |   |   |                                      | ☐ Wages, commissions, bonuses, tips |                               |   |          |
|  |   |  |   | ☐ Opera  | ating a business  |   |   |                                      | Operating a                         | business                      |   |          |
|  |   | dar year be<br>December                      |   | ■ Wage   | es, commissions,<br>s, tips   |   | \$47,203.0  |                                      | l Wages, con<br>onuses, tips        | nmissions,                    |   |          |
|  |   |  |   | ☐ Oper   | ating a business  |   |   |                                      | l Operating a                       | business                      |   |          |
| 5.   | Include in unemploy gambling  List each | come regard<br>ment, and co<br>and lottery v | dless of whe<br>other public b<br>winnings. If y<br>the gross inc | ther that incomened the theorem that income the theorem that income the theorem the theorem that income the theorem the theorem that income the theore | his year or the two<br>come is taxable. Ex-<br>nents; pensions; rer<br>g a joint case and you<br>each source separa | amples<br>ntal inco<br>ou have                                    | of other income a<br>ome; interest; divi<br>e income that you | are alimo<br>ridends; r<br>u receive | noney collect<br>d together, lis    | ed from law<br>t it only onc  | suits; royalties; a                         |          |
|  |   |  |   | Debtor 1   |   |   |   | D                                    | ebtor 2                             |                               |   |          |
|  |   |  |   |  | of income   | (befo   | ss income<br>ore deductions ar<br>usions)                     | S                                    | ources of inc<br>escribe below      |                               | Gross incor<br>(before dedu<br>and exclusio | ctions   |
| ₽a<br>6.   |   |  |   |  | fore You Filed for  |   |   |                                      |                                     |                               |   |          |
| 0.   | □ No.                                   | Neither D                                    | ebtor 1 nor   | Debtor 2 h   | orimarily consume<br>as primarily consumation<br>family, or househo   | umer d  | ebts. Consumer  | debts are                            | e defined in 1                      | 1 U.S.C. § 1                  | 101(8) as "incurre                          | ed by an |
|  |   | During the                                   | 90 days bef<br>Go to line   | •  | d for bankruptcy, di  | bankruptcy, did you pay any creditor a total of \$6,225* or more? |   |                                      |                                     |                               |   |          |
|  |   | □ Yes  | paid that o   | reditor. Do payments   | tor to whom you pai<br>not include paymer<br>to an attorney for the<br>loand every 3 year                           | nts for d<br>his ban  | lomestic support kruptcy case.                                | obligatio                            | ns, such as c                       | hild support                  | t and alimony. Al                           |          |
|  | ■ Yes.                                  | Debtor 1                                     | or Debtor 2   | or both ha   | ve primarily consu  | ımer d  | ebts.   |                                      |                                     |                               | ant.  |          |
|  |   | No.  | Go to line  | 7.   |   |   |   |                                      |                                     |                               |   |          |
|  |   | □ <sub>Yes</sub>                             | include pa  | yments for   | tor to whom you pai<br>domestic support o<br>ankruptcy case.  |   |   |                                      |                                     |                               |   |          |
|  | Creditor                                | s Name an                                    | d Address   |  | Dates of payme  | nt  | Total amoun   | _                                    | mount you still owe                 | Was this                      | payment for                                 |          |
| <ol> <li>Within 1 year before you filed for bank<br/>Insiders include your relatives; any gener<br/>corporations of which you are an officer,<br/>including one for a business you operate<br/>support and alimony.</li> </ol> |   |  |   | y general pa<br>officer, direc<br>operate as a   | artners; relatives of<br>ctor, person in contr  | any ge<br>rol, or o   | neral partners; pa<br>wner of 20% or m                        | artnershi <sub>l</sub><br>nore of th | os of which you                     | ou are a ger<br>curities; and | neral partner;<br>I any managing a          |          |
|  |   |  | ments to an i   | nsider   | Dates of  | m4  | Total aman  |                                      |                                     | Deer (                        | lau thia mar                                |          |
|  | msider's                                | Name and                                     | Audress   |  | Dates of payme  | iit   | Total amoun paid  | _                                    | mount you<br>still owe              | Reason I                      | for this paymen                             |          |
| Offic  | cial Form 107                           |  |   | State  | ment of Financial Aff   | airs for  | Individuals Filing f  | for Bankrı                           | ıptcy                               |                               |   | page 2   |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

| Del | otor 1        | Lisa Karin Persson  |                           | Cas                   | e number (if known)  | 16-10257        |                       |
|-----|---------------|---|---------------------------|-----------------------|----------------------|-----------------|-----------------------|
| 8.  | insid         | in 1 year before you filed for bankruptcy<br>ler?<br>de payments on debts guaranteed or cosig                                   |                           | ments or transfer a   | any property on a    | ccount of a d   | ebt that benefited an |
|     |               | No<br>Voc Liet all pourments to an incider  |                           |                       |                      |                 |                       |
|     |               | Yes. List all payments to an insider der's Name and Address   | Dates of payment          | Total amount paid     | Amount you still owe | Reason for      | this payment          |
| Par | t 4:          | Identify Legal Actions, Repossessions   | and Foreclosures          | para                  |                      | molado orod     | nor o riamo           |
| 9.  | <b>With</b> i | in 1 year before you filed for bankruptcy<br>all such matters, including personal injury c<br>fications, and contract disputes. | , were you a party in a   |                       |                      |                 |                       |
|     |               | No<br>Yes. Fill in the details.   |                           |                       |                      |                 |                       |
|     |               | e title<br>e number   | Nature of the case        | Court or agency       |                      | Status of th    | e case                |
| 10. | Chec          | in 1 year before you filed for bankruptcy k all that apply and fill in the details below.                                       |                           | erty repossessed, f   | oreclosed, garnis    | hed, attached   | d, seized, or levied? |
|     | _             | Yes. Fill in the information below.   |                           |                       |                      |                 |                       |
|     | Cred          | ditor Name and Address  | Describe the Property     |                       | Date                 |                 | Value of the property |
|     |               |   | Explain what happene      | d                     |                      |                 | ргоролу               |
|     | acco          | in 90 days before you filed for bankrupto<br>ounts or refuse to make a payment becau<br>No<br>Yes. Fill in the details.         |                           | cluding a bank or fil | nancial institutior  | n, set off any  | amounts from your     |
|     |               |   | Describe the action the   | e creditor took       | Date a               | action was      | Amount                |
| 12. | cour          | in 1 year before you filed for bankruptcy<br>t-appointed receiver, a custodian, or and<br>No                                    |                           | erty in the possessi  | ion of an assigne    | e for the bend  | efit of creditors, a  |
| Par | ⊔<br>t 5:     | Yes  List Certain Gifts and Contributions   |                           |                       |                      |                 |                       |
|     | With          | in 2 years before you filed for bankrupto<br>No<br>Yes. Fill in the details for each gift.                                      | ey, did you give any gift | s with a total value  | of more than \$60    | 0 per person    | ?                     |
|     |               | s with a total value of more than \$600 person  | Describe the gifts        |                       | Dates<br>the gi      | you gave<br>fts | Value                 |
|     |               | son to Whom You Gave the Gift and lress:  |                           |                       |                      |                 |                       |
| 14. |               | in 2 years before you filed for bankrupto No Yes. Fill in the details for each gift or contr                                    |                           | s or contributions    | with a total value   | of more than    | \$600 to any charity  |
|     | mor<br>Cha    | s or contributions to charities that total<br>re than \$600<br>rrity's Name<br>ress (Number, Street, City, State and ZIP Code)  | Describe what you         | u contributed         | Dates<br>contri      | you<br>ibuted   | Value                 |
| Par | t 6:          | List Certain Losses   |                           |                       |                      |                 |                       |
|     |               |   |                           |                       |                      |                 |                       |

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Best Case Bankruptcy

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15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Deb | otor 1 Lisa Karin Persson   |                                      |  | Case number (if known) 16-10257                           |                      |                           |  |  |
|-----|---|--------------------------------------|--|---|----------------------|---------------------------|--|--|
|     |   |                                      |  |   |                      |                           |  |  |
|     | disaster, or gambling?  |                                      |  |   |                      |                           |  |  |
|     | ■ No  |                                      |  |   |                      |                           |  |  |
|     | Yes. Fill in the details.   |                                      |  |   |                      |                           |  |  |
|     | Describe the property you lost how the loss occurred  | Include                              | be any insurance coverage for the least the amount that insurance has paid. It goes insurance claims on line 33 of Scheotty. | _ist loss   | of your              | Value of property<br>lost |  |  |
| Par | t 7: List Certain Payments or   | Transfers                            |  |   |                      |                           |  |  |
| 16. | consulted about seeking bankru  | uptcy or preparir                    | d you or anyone else acting on young a bankruptcy petition? s, or credit counseling agencies for se                          |   |                      | rty to anyone you         |  |  |
|     | Yes. Fill in the details.   |                                      |  |   |                      |                           |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Paymen                    | t, if Not You                        | Description and value of any property transferred  |   | payment<br>nsfer was | Amount of payment         |  |  |
|     | Barraza Law, PLLC<br>14245-F Ambaum Blvd. SW<br>Burien, WA 98198<br>Burien, WA 98198<br>omar@barrazalaw.com |                                      | Attorney Fees  | 01/20   | /16                  | \$1,500.00                |  |  |
| 17. |   | your creditors o                     | d you or anyone else acting on your<br>r to make payments to your creditor<br>red on line 16.                                |   | er any prope         | rty to anyone who         |  |  |
|     | ■ No  |                                      |  |   |                      |                           |  |  |
|     | Yes. Fill in the details.   |                                      | 5 10 1 1   | . 5.  | _                    |                           |  |  |
|     | Person Who Was Paid<br>Address  |                                      | Description and value of any property transferred  |   | payment<br>nsfer was | Amount of payment         |  |  |
| 18. | transferred in the ordinary cours   | se of your busin<br>d transfers made | as security (such as the granting of a s   |   |                      |                           |  |  |
|     | ☐ Yes. Fill in the details.   |                                      |  |   |                      |                           |  |  |
|     | Person Who Received Transfer Address  | 7                                    | Description and value of property transferred  | Describe any prop<br>payments receive<br>paid in exchange |                      | Date transfer was made    |  |  |
|     | Person's relationship to you  |                                      |  |   |                      |                           |  |  |
| 19. | Within 10 years before you filed beneficiary? (These are often cal ■ No □ Yes. Fill in the details.         |                                      | did you transfer any property to a sion devices.)  | elf-settled trust or si                                   | milar device         | of which you are a        |  |  |
|     | Name of trust   |                                      | Description and value of the propo   | erty transferred  |                      | Date Transfer was made    |  |  |
|     |   |                                      |  |   |                      |                           |  |  |

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

| Га  | ιο.   | List of Certain Financial Accounts, in   | ısıı uı | ments, sale Depos  | oil boxes, and si              | iorage   | Offics   |   |
|-----|---|--|---------|--|--------------------------------|----------|--|---|
| 20. | solo<br>Incl  | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. |         |  |                                |          |  |   |
|     |   | Yes. Fill in the details.  |         |  |                                |          |  |   |
|     |   | me of Financial Institution and dress (Number, Street, City, State and ZIP e)  |         | st 4 digits of<br>count number   | Type of according trument      | unt or   | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |
| 21. |   | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?   |         |  |                                |          |  |   |
|     |   | No<br>Yes. Fill in the details.  |         |  |                                |          |  |   |
|     |   | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)  |         | Who else had access to it?  Address (Number, Street, City, State and ZIP Code) |                                | Descr    | ibe the contents                                     | Do you still have it?                         |
| 22. | Hav   | e you stored property in a storage unit  | or pl   | ace other than you   | ur home within 1               | year b   | pefore you filed for bankrupto                       | у   |
|     |   | No<br>Yes. Fill in the details.  |         |  |                                |          |  |   |
|     |   | me of Storage Facility dress (Number, Street, City, State and ZIP Code)  |         | Who else has or<br>to it?<br>Address (Number,<br>State and ZIP Code)           |                                | Descr    | ibe the contents                                     | Do you still have it?                         |
| Pai | t 9:  | Identify Property You Hold or Control  | ol for  | Someone Else   |                                |          |  |   |
| 23. |   | you hold or control any property that someone.   | omeo    | one else owns? Inc   | clude any proper               | ty you   | borrowed from, are storing for                       | or, or hold in trust                          |
|     |   | No<br>Yes. Fill in the details.  |         |  |                                |          |  |   |
|     | _   | ner's Name<br>dress (Number, Street, City, State and ZIP Code)   |         | Where is the pro<br>(Number, Street, City,<br>Code)                            | operty?<br>State and ZIP       | Descr    | ibe the property                                     | Value   |
| Pai | t 10:   | Give Details About Environmental In  | forma   | ation  |                                |          |  |   |
| For | the p   | ourpose of Part 10, the following defini   | tions   | apply:   |                                |          |  |   |
|     | toxi  | ironmental law means any federal, stat<br>c substances, wastes, or material into<br>ulations controlling the cleanup of thes   | the a   | ir, land, soil, surfa  | ce water, ground               | • •      |  |   |
|     |   | means any location, facility, or proper<br>wn, operate, or utilize it, including dis   | •       | •  | environmental                  | law, wł  | hether you now own, operate                          | , or utilize it or used                       |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. |  |         |  |                                |          |  |   |
| Rep | ort a   | II notices, releases, and proceedings t  | hat yo  | ou know about, re  | gardless of wher               | n they o | occurred.  |   |
| 24. | Has   | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?   |         |  |                                |          |  |   |
|     |   | No<br>Yes. Fill in the details.  |         |  |                                |          |  |   |
|     |   | me of site<br>dress (Number, Street, City, State and ZIP Code)   |         | Governmental u<br>Address (Number,<br>ZIP Code)                                | nit<br>Street, City, State and |          | nvironmental law, if you<br>now it                   | Date of notice                                |
|     |   |  |         |  |                                |          |  |   |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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| 25.    | Have you notified any governmental unit of  | any release of hazardous material?                 |  |                  |  |  |  |  |  |  |
|--------|---|--|--|------------------|--|--|--|--|--|--|
|        | <b>=</b> No.  |  |  |                  |  |  |  |  |  |  |
|        | ■ No □ Yes. Fill in the details.  |  |  |                  |  |  |  |  |  |  |
|        | Name of site  | Governmental unit                                  | Environmental law, if you              | Date of notice   |  |  |  |  |  |  |
|        | Address (Number, Street, City, State and ZIP Code)  | Address (Number, Street, City, State and ZIP Code) | know it                                |                  |  |  |  |  |  |  |
| 26.    | Have you been a party in any judicial or adr  | ninistrative proceeding under any envi             | ronmental law? Include settlements     | and orders.      |  |  |  |  |  |  |
|        | <b>=</b>  |  |  |                  |  |  |  |  |  |  |
|        | ■ No □ Yes. Fill in the details.  |  |  |                  |  |  |  |  |  |  |
|        | Case Title  | Court or agency                                    | Nature of the case                     | Status of the    |  |  |  |  |  |  |
|        | Case Number   | Name Address (Number, Street, City,                |  | case             |  |  |  |  |  |  |
|        |   | State and ZIP Code)                                |  |                  |  |  |  |  |  |  |
| Par    | Part 11: Give Details About Your Business or Connections to Any Business  |  |  |                  |  |  |  |  |  |  |
| 27.    | Within 4 years before you filed for bankrup   | tcy, did you own a business or have an             | y of the following connections to an   | y business?      |  |  |  |  |  |  |
|        | ☐ A sole proprietor or self-employed i  | n a trade, profession, or other activity,          | either full-time or part-time          |                  |  |  |  |  |  |  |
|        | ☐ A member of a limited liability comp  | pany (LLC) or limited liability partnershi         | ip (LLP)                               |                  |  |  |  |  |  |  |
|        | ☐ A partner in a partnership  | ☐ A partner in a partnership                       |  |                  |  |  |  |  |  |  |
|        | ☐ An officer, director, or managing executive of a corporation  |  |  |                  |  |  |  |  |  |  |
|        | ☐ An owner of at least 5% of the votin  | g or equity securities of a corporation            |  |                  |  |  |  |  |  |  |
|        | ■ No. None of the above applies. Go to Part 12.   |  |  |                  |  |  |  |  |  |  |
|        | Yes. Check all that apply above and fill in the details below for each business.  |  |  |                  |  |  |  |  |  |  |
|        | Business Name  Describe the nature of the business  Address  Employer Identification number  Do not include Social Security number or ITIN.                                       |  |  |                  |  |  |  |  |  |  |
|        | (Number, Street, City, State and ZIP Code)  | Name of accountant or bookkeeper                   | number of frin.                        |                  |  |  |  |  |  |  |
|        |   |  | Dates business existed                 |                  |  |  |  |  |  |  |
| 28.    | Vithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial nstitutions, creditors, or other parties. |  |  |                  |  |  |  |  |  |  |
|        | ■ No  |  |  |                  |  |  |  |  |  |  |
|        | ■ No □ Yes. Fill in the details below.  |  |  |                  |  |  |  |  |  |  |
|        | Name  | Date Issued  |  |                  |  |  |  |  |  |  |
|        | Address<br>(Number, Street, City, State and ZIP Code)   |  |  |                  |  |  |  |  |  |  |
| Par    | t 12: Sign Below  |  |  |                  |  |  |  |  |  |  |
| Lhav   | ve read the answers on this Statement of Fi   | nancial Affairs and any attachments, an            | nd I declare under penalty of periury  | that the answers |  |  |  |  |  |  |
| are t  | rue and correct. I understand that making a   | false statement, concealing property,              | or obtaining money or property by fra  |                  |  |  |  |  |  |  |
|        | a bankruptcy case can result in fines up to S.C. §§ 152, 1341, 1519, and 3571.  | \$250,000, or imprisonment for up to 20            | years, or both.                        |                  |  |  |  |  |  |  |
| /s/    | Lisa Karin Persson  |  |  |                  |  |  |  |  |  |  |
|        | a Karin Persson   | Signature of Debtor 2                              |  |                  |  |  |  |  |  |  |
| Ū      | nature of Debtor 1  | _  |  |                  |  |  |  |  |  |  |
| Dat    | e February 4, 2016  | Date   |  |                  |  |  |  |  |  |  |
| _      | you attach additional pages to Your Stateme   | ent of Financial Affairs for Individuals F         | Filing for Bankruptcy (Official Form 1 | 07)?             |  |  |  |  |  |  |
|        |   |  |  |                  |  |  |  |  |  |  |
|        |   | t on ottomorate help (III                          |  |                  |  |  |  |  |  |  |
| Did    | you pay or agree to pay someone who is no   | t an attorney to help you fill out bankru          | ptcy torms?                            |                  |  |  |  |  |  |  |
|        | es. Name of Person Attach the <i>Bankro</i>   | uptcy Petition Preparer's Notice, Declaration      | on, and Signature (Official Form 119). |                  |  |  |  |  |  |  |
| Offici | al Form 107 Staten  | nent of Financial Affairs for Individuals Filing   | for Bankruptcy                         | page             |  |  |  |  |  |  |

Case number (if known) 16-10257

Best Case Bankruptcy

Debtor 1 Lisa Karin Persson

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Case 16-10257-TWD Doc 10 Filed 02/04/16 Ent. 02/04/16 18:56:12 Pg. 22 of 29

Debtor 1 Lisa Karin Persson Case number (if known) 16-10257

# Notice Required by 11 U.S.C. § 342(b) for **Individuals Filing for Bankruptcy** (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

#### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

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most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity:

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the Chapter 7 Means Test Calculation (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts. subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called exempt property. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on Schedule C: The Property You Claim as Exempt (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

\$1,717

filing fee \$1,167 administrative fee \$550

total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_form s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a joint case. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

#### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Pg. 27 of 29

# **United States Bankruptcy Court** Western District of Washington

| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)  1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept \$ 3,500.00  Prior to the filing of this statement I have received \$ 1,500.00  Balance Due \$ 2,000.00  2. The source of the compensation paid to me was:  Debtor Other (specify):  3. The source of compensation to be paid to me is:  Debtor Other (specify):  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  | In re   | Lisa Karin Persson  |   | Case No   |  |          |  |  |
|---|---------|---|---|---|--|----------|--|--|
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b). I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  S  3,500.00  Prior to the filing of this statement I have received  Balance Due  S  2,000.00  The source of the compensation paid to me was:  Debtor  Other (specify):  The source of compensation to be paid to me is:  Debtor  Other (specify):  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy.  D. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required:  C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actic any other adversary proceeding.  CERTIFICATION  Lecrtify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debto  |         |   | Debtor(s)   | Chapter   | 13   |          |  |  |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:  For legal services, I have agreed to accept  Prior to the filing of this statement I have received  \$ 1,500.00  Balance Due  S 2,000.00  The source of the compensation paid to me was:  Debtor  Other (specify):  The source of compensation to be paid to me is:  Debtor  Other (specify):  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy.  Deparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  (I) (Other provisions as needed!)  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoldance of liens on household goods.  ERPIFICATION  Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actic any other adversary proceeding.  CERTIFICATION  Lecrify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actic any other adversary proceeding.   |         | DISCLOSURE OF COMPE   | NSATION OF ATTO   | RNEY FOR D  | EBTOR(S)                                   |          |  |  |
| Prior to the filing of this statement I have received \$ 1,500.00  Balance Due \$ 2,000.00  2. The source of the compensation paid to me was:  Debtor Other (specify):  3. The source of compensation to be paid to me is:  Debtor Other (specify):  4. Debtor Other (specify):  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law in the person of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required:  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC \$22(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay action any other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  Signature of Attorney Barraza Law, PLLC 14245-F Ambaum Blvd, SW Burien, WA 98198 206-933-7861 Fax: 206-933-7863 omar@aerizalaw.com   | C       | ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to   |   |   |  |          |  |  |
| Balance Due \$ 2,000.00  2. The source of the compensation paid to me was:  Debtor Other (specify):  3. The source of compensation to be paid to me is:  Debtor Other (specify):  4. Debtor Other (specify):  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filling of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  5. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actionary other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) the above-disclosed fee does not include the following service:  Representation of the debtor in any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  Pebruary 4, 2016  Date  Signature of Attorney Barraza Law, PLLC  14 |         | For legal services, I have agreed to accept   |   | \$  | 3,500.00                                   |          |  |  |
| Balance Due \$ 2,000.00  2. The source of the compensation paid to me was:  Debtor Other (specify):  3. The source of compensation to be paid to me is:  Debtor Other (specify):  4. Debtor Other (specify):  4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filling of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  5. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actionary other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) the above-disclosed fee does not include the following service:  Representation of the debtor in any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  Pebruary 4, 2016  Date  Signature of Attorney Barraza Law, PLLC  14 |         | Prior to the filing of this statement I have received   |   | \$  | 1,500.00                                   |          |  |  |
| ■ Debtor  |         |   |   |   | 2,000.00                                   |          |  |  |
| The source of compensation to be paid to me is:  ■ Debtor □ Other (specify):  4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law in the proof of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing or reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay action any other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(sthis bankruptcy proceeding.    John R. Laris   John R. Lar   | 2. T    | he source of the compensation paid to me was:   |   |   |  |          |  |  |
| ■ Debtor  |         | ■ Debtor □ Other (specify):   |   |   |  |          |  |  |
| I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing or reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay action any other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  February 4, 2016  Date  John R. Laris  John R. Laris  John R. Laris  John R. Laris 44406  Signature of Attorney  Barraza Law, PLLC  14245-F. Ambaum Blvd. SW  Burien, WA 98198  206-933-7861 Fax: 206-933-7863  omar@barrazalaw.com  | 3. T    | he source of compensation to be paid to me is:  |   |   |  |          |  |  |
| □ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing or reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actionary other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.    Sel John R. Laris   Joh   |         | ■ Debtor □ Other (specify):   |   |   |  |          |  |  |
| copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.  5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actionary other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  February 4, 2016  Date  /// John R. Laris  John R. Laris  John R. Laris  John R. Laris 44406  Signature of Attorney  Barraza Law, PLLC  14245-F Ambaum Blvd. SW  Burlen, WA 98198  206-933-7863  omar@barrazalaw.com  | 4. ■    | I have not agreed to share the above-disclosed comp   | pensation with any other person   | unless they are me  | mbers and associates of my l               | aw firm. |  |  |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actionary other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) this bankruptcy proceeding.  February 4, 2016  Date    Isl John R. Laris   John  | [       |   |   |   |  | m. A     |  |  |
| b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed]  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  By agreement with the debtor(s), the above-disclosed fee does not include the following service:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actionary other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(sthis bankruptcy proceeding.    Solon R. Laris   John R. Laris  | 5. I    | n return for the above-disclosed fee, I have agreed to re   | ender legal service for all aspec   | ts of the bankruptcy  | case, including:                           |          |  |  |
| Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay action any other adversary proceeding.  CERTIFICATION  I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(statistic bankruptcy proceeding.  February 4, 2016  Date  Is/ John R. Laris  John R. Laris 44406  Signature of Attorney  Barraza Law, PLLC  14245-F Ambaum Blvd. SW  Burien, WA 98198  206-933-7861 Fax: 206-933-7863  omar @barrazalaw.com  | b<br>c. | Preparation and filing of any petition, schedules, sta<br>Representation of the debtor at the meeting of credit<br>[Other provisions as needed]<br>Negotiations with secured creditors to<br>reaffirmation agreements and application | tement of affairs and plan which<br>ors and confirmation hearing, a<br>reduce to market value; ex<br>ons as needed; preparation | h may be required;<br>nd any adjourned h<br>emption plannin | earings thereof; g; preparation and filing | of       |  |  |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s this bankruptcy proceeding.    February 4, 2016   | 6. B    | Representation of the debtors in any di   | e does not include the following schargeability actions, jud  | g service:<br>icial lien avoidar                            | ces, relief from stay act                  | ions or  |  |  |
| this bankruptcy proceeding.  February 4, 2016  Date  John R. Laris  John R. Laris 44406  Signature of Attorney  Barraza Law, PLLC  14245-F Ambaum Blvd. SW  Burien, WA 98198  206-933-7861 Fax: 206-933-7863  omar@barrazalaw.com   |         |   | CERTIFICATION   |   |  |          |  |  |
| John R. Laris 44406 Signature of Attorney Barraza Law, PLLC 14245-F Ambaum Blvd. SW Burien, WA 98198 206-933-7861 Fax: 206-933-7863 omar@barrazalaw.com   |         |   | y agreement or arrangement for  | payment to me for   | representation of the debtor               | (s) in   |  |  |
| Signature of Attorney Barraza Law, PLLC 14245-F Ambaum Blvd. SW Burien, WA 98198 206-933-7861 Fax: 206-933-7863 omar@barrazalaw.com   | Fe      | bruary 4, 2016  | /s/ John R. Laris   |   |  |          |  |  |
| Barraza Law, PLLC<br>14245-F Ambaum Blvd. SW<br>Burien, WA 98198<br>206-933-7861 Fax: 206-933-7863<br>omar@barrazalaw.com   |         | •   | •   |   |  |          |  |  |
| 14245-F Ambaum Blvd. SW<br>Burien, WA 98198<br>206-933-7861 Fax: 206-933-7863<br>omar@barrazalaw.com  |         |   |   |   |  |          |  |  |
| 206-933-7861 Fax: 206-933-7863<br>omar@barrazalaw.com   |         |   | 14245-F Ambaun  | n Blvd. SW  |  |          |  |  |
| omar@barrazalaw.com   |         |   | ,   |   |  |          |  |  |
|   |         |   |   |   |  |          |  |  |
|   |         |   |   |   |  |          |  |  |
|   |         |   |   |   |  |          |  |  |

# **United States Bankruptcy Court** Western District of Washington

| In re | Lisa Karin Persson |                  | Case No. | 16-10257 |  |
|-------|--------------------|------------------|----------|----------|--|
|       |                    | Debtor(s)        | Chapter  | 13       |  |
|       |                    |                  | •        |          |  |
|       |                    |                  |          |          |  |
|       |                    |                  |          |          |  |
|       | VEDIEICA           | TION OF CREDITOR | MATDIV   |          |  |
|       | VERIFICA           | TION OF CREDITOR | MAIKIA   |          |  |
|       |                    |                  |          |          |  |
|       |                    |                  |          |          |  |
|       |                    |                  |          |          |  |
|       |                    |                  |          |          |  |

Isa Karin Persson
Lisa Karin Persson
Signature of Debtor

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

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Date: February 4, 2016